**FORM D** 

## **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**FORM D** 

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION RECEIVED

OMB Number:.... Expires: ..... Estimated average burden hours per form .....

OMB APPROVAL

NOTICE OF SALE OF SECURITIES

Prefix

Serial

**SEC USE ONLY** 

DATE RECEIVED

Name of Offering	7518
Private Placement of Series 1 Preferred Stock (and the underlying Common Stock issuable upon conversion thereof)	1 10
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐ Section 4(6) ☐ UL	.OE
Type of Filing: ☐ Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer	• ******
Z-Force Communications, Inc	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (In	cluding Area Code)
2855 Kifer Road, Suite 204, Santa Clara, CA 95051 (408) 855-1015	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (In	_ = ^ > >
(if different from Executive Offices) same as above	CESSED
Brief Description of Business: Communication Equipment	07 2004
Time of Business Operation	•
☐ corporation ☐ limited partnership, already formed ☐ other (please specify) FIN	OMSON VANCIAL
business trust limited partnership, to be formed	
Month Year	
Actual or Estimated Date of Incorporation or Organization:	☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction C A	
GENERAL INSTRUCTIONS	
Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.0 U.S.C. 77d(6).	501 et seq. or 15
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed v Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received a the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not make be photocopies of the manually signed copy or bear typed or printed signatures.	nually signed must
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer as	nd offering, any

## Filing Fee:

appendix need not be filed with the SEC.

There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC	IDENTIFICATION DATA						
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual):	Alan Kessler							
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 2855 Kifer Road, S	Suite 204, Santa C	Clara, CA 95051				
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner		Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual):	Sirk Roh							
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 2855 Kifer Road, S	Suite 204, Santa C	Clara, CA 95051				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual):	Barry X Lynn							
Business or Residence Address (Number and Street, City, State, Zip Code): 1200 Riverplace Blvd. #902, Jacksonville, FL 32207									
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual):	Peter Loukianoff							
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 480 Cowper Street	t, Suite 200, Palo	Alto, CA 94301				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual):	Charlie Carinalli							
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 1466 Teal Drive, S	unnyvale, CA 94	087				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual):	QTV Capital Limited							
Business or Residence Add 95070	ress (Number and	Street, City, State, Zip Coo	de): Steve Schlossared	ck, 12930 Saratoç	ga Avenue, Suite D-8, Saratoga CA				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual):	Larry Boucher							
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 2855 Kifer Road, S	Suite 204, Santa C	Clara, CA 95051				
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual):	Alloy Ventures	· · · · · · · · · · · · · · · · · · ·						
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): c/o Peter Loukian	off, 480 Cowper S	Street, Suite 200, Palo Alto, CA 94301				

60359496v1 2 of 9

Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Gary Johnson			-
Business or Residence Add	ress (Number and	Street, City, State, Zip Co.	de): 5490 Ora Street, S	an Jose, CA 951	29
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Adam Tachner	·····		*
Business or Residence Add	ress (Number and	Street, City, State, Zip Co	de): 529 Almanor Aver	nue. Sunnvvale. C	CA 94085

60359496v1 3 of 9

							B. INFOR	RMATION	ABOUT O	FFERING						
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									, J	′es		<u>No</u>			
										•						
2.	What is the minimum investment that will be accepted from any individual?								\$6	0.12						
•									<u>y</u>	<u>′es</u>		<u>No</u>				
	,									 🖾						
Full i	Name	e (Last na	me first, if	individual)	):							•				
Busir	ness	or Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip (	Code):	٠.							
Nam	e of	Associate	d Broker c	or Dealer:									-			
				d Has Soli neck individ				nasers:								☐ All States
□ [A	L]	[AK]	□ [AZ]	☐ [AR]	□ [CA]	[CO]	□ [CT]	□ [DE]	□ [DC]	[FL]	☐ [GA]	□ [HI]	□ (ID)			•
<u> </u>	_]	□ [IN]	□ [IA]	☐ [KS]	□ [KY]	□ [LA]	[ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]			
□ (N	/T]	□ [NE]	□ [NV]	□ [NH]	□ [NJ]	[NM]	□ [NY]	☐ [NC]	□ [ND]	[HO]	□ [OK]	□ [OR]	☐ [PA]			
□ {F	RI]	☐ [SC]	☐ [SD]	□ [TN]	□ [TX]	□ [UT]	[VT]	□ [VA]	□ [WA]	[WV]	□ [WI]	□ [ŴY]	☐ [PR]		-	* .
Full 1	Name	e (Last na	me first, if	individual)	):											
Busir	ness	or Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip (	Code):					,			
Nam	e of a	Associate	d Broker c	r Dealer:						,			·			
				d Has Soli neck individ												☐ All States
□ [A	L]	☐ [AK]	□ [AZ]	[AR]	☐ [CA]	☐ [CO]	☐ [CT]	□ [DE]	□ [DC]	☐ [FL]	☐ [GA]	☐ [HI]	□ [ID]			
	_]	□ [IN]	□ [IA]	□ [KS]	□ [KY]	□ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]			•
□ [N	ΛT]	□ [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	☐ [NC]	□ [ND]	□ [OH]	□ [OK]		□ [PA]			
☐ [F	RI]	☐ [SC]	☐ [SD]	□ [TN]	□ [TX]	[[UT]	□ [VT]	□ [VA]	□ [WA]	□ [WV]	[WI]	□ [WY]	☐ [PR]			
Full I	Name	e (Last na	me first, if	individual)	):											
Busir	ness	or Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip (	Code):								
Nam	e of	Associate	d Broker o	or Dealer:					·							
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□ [A	NL]	□ [AK]	□ [AZ]	☐ [AR]	☐ [CA]	☐ [CO]	□ [CT]	□ [DE]		□ [FL]	☐ [GA]	[HI]	□ [ID]			
	_]	□ [IN]	☐ [IA]	[KS]	[KY]	☐ [LA]	☐ [ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	☐ [MO]			
□ [N	/IT]	□ [NE]	□ [NV]	□ [NH]	□ [NJ]	☐ [NM]	□ [NY]	□ [NC]	□ [ND]	□ [OH]	□ [OK]	□ [OR]	□ [PA]			
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

60359496v1 4 of 9

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	JSE OF PROCEEDS		
Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box  and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
Type of Security	Aggregate Offering Price		Amount Already Sold
Debt	\$ 0	<u>\$</u>	0
Equity	\$ 11,830,415.00	\$	8,532,297.00 <sup>1</sup>
☐ Common			
Convertible Securities (including warrants)	\$ 14,788.02	<u>\$</u>	0
Partnership Interests	\$ 0	\$	0
Other (Specify))	\$ 0	\$	0
Total	\$ 11,845,203.02	- <del>-</del>	8,532,297.00
Answer also in Appendix, Column 3, if filing under ULOE.			
Enter the number of accredited and non-accredited investors who have purchases securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
	Number Investors		Aggregate Dollar Amount Of Purchases
Accredited Investors	28	<u>\$</u>	8,532,297.00
Non-accredited Investors	0	<u>\$.</u>	0
Total (for filings under Rule 504 only)	0 .	\$	0
Answer also in Appendix, Column 4, if filing under ULOE.			
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
Type of Offering	Types of Security	•	Dollar Amount Sold
Rule 505	N/A		N/A
Regulation A	N/A	<u>\$</u>	N/A
Rule 504	N/A	\$	N/A
Total	N/A		N/A
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be give as subject to future contingencies. If the amount of an expenditure is not know, furnish as estimate and check the box to the left of the estimate.			
Transfer Agent's Fee		\$	
Printing and Engraving Costs		\$	
Legal Fees		\$_	
Accounting Fees		\$	
Engineering Fees		\$	·
Sales Commissions (specify finders' fees separately)		\$	

Includes an aggregate of \$3,629,614.20 in principal and accrued interest of conversion of indebtedness previously noticed.

5 of 9

_	C. OFFERING PRICE, NUM	MBER OF INVESTORS, EXPEN	SES AND L	JSE OF PROCEED	S .					
4	b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to F the "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This differ	ence is			<u>\$</u>		11,845,203.02		
5	Indicate below the amount of the adjusted gross proceeds used for each of the purposes shown. If the amount for a estimate and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in response	any purpose is not known, furnish ne total of the payments listed mu	an ist equal	Double out a A						
				Payments to Officers, Directors & Affiliates			F	Payments to Others		
	Salaries and fees			\$			\$			
	Purchase of real estate	······································		\$			\$			
	Purchase, rental or leasing and installation of made	chinery and equipment		\$	<u>.                                    </u>		\$			
	Construction or leasing of plant buildings and facil	lities		\$			\$			
	Acquisition of other businesses (including the valu offering that may be used in exchange for the ass		r <sub>.</sub>	\$			\$			
	Repayment of indebtedness			<u>\$</u>		· 🗖 : 🔒	\$	I .		
	Working capital			\$	<u> </u>	$\boxtimes$	\$	11,845,203.02		
	Other (specify):			\$	<u>:</u>		\$			
	· · · · · · · · · · · · · · · · · · ·			\$	· ·		\$	, , , , , , , , , , , , , , , , , , ,		
	Column Totals			\$	<u> </u>		\$			
	Total payments Listed (column totals added)			⊠	\$	11,84	5,203.	02		
		D. FEDERAL SIGNATURE	:		1					
СО	is issuer has duly caused this notice to be signed by the ur nstitutes an undertaking by the issuer to furnish to the U.S. the issuer to any non-accredited investor pursuant to para	. Securities and Exchange Comm	n. If this no	otice is filed under F n written request of	Rule 50	05, the faff, the in	ollowi	ng signature ation furnished		
Iss	uer (Print or Type)	Signature		(	Date	9				
Z-	Force Communications, Inc.	W			Apr	il 20, 20	04			
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)								
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## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

60359496v1 6 of 9